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Attorney Docket No. 2477US0P

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: ODAKA, H.

Serial No.: 09/485640

Filed: FEB. 11, 2000

Title: Anti-Inflammatory Agent



Art Unit: 1614

Examiner:

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REQUEST FOR STATUS OF APPLICATION

Commissioner for Patents  
Washington, D.C. 20231

Sir:

Applicants respectfully request a report on the status of the above-identified application.

If there are any questions, please call applicants' attorney at (847) 383-3372.

Respectfully submitted,

Dated: December 6, 2000

Philippe Y. Riesen, Reg. No. 35,657  
Mark Chao, Ph.D., Reg. No. 37,293  
Attorney for Applicants  
Customer No. 23115



GAU 1614

Please type ☐ inside this box → ☐PTO/SB/21 (6-98)  
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/485640	
	<b>Filing Date</b>	02/11/2000	
	<b>First Named Inventor</b>	ODAKA, H.	
	<b>Group Art Unit</b>	1614	
	<b>Examiner Name</b>		
<b>Total Number of Pages in This Submission</b>	3	<b>Attorney Docket Number</b>	2477 USOP

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<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input checked="" type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>Remarks</b>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 500799.	

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm or Individual name</b>	MARK CHAO -Reg. No. 37,293 Customer Number 23,115
<b>Signature</b>	
<b>Date</b>	12-6-00

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: DEC 6, 2000			
<b>Typed or printed name</b>	Mark Chao		
<b>Signature</b>		<b>Date</b>	12-6-00

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